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Fill in this information to	o identify your case:		
United States Bankruptcy	Court for the:		
WESTERN DISTRICT OF	F PENNSYLVANIA		
Case number (if known)	19-23474	Chapter you are filing under:	
		☐ Chapter 7	
		☐ Chapter 11	
		☐ Chapter 12	
		■ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	DEBORAH	
	your government-issued picture identification (for	First name	First name
	example, your driver's	G.	
	license or passport).	Middle name	Middle name
	Bring your picture	HAINER	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8240	

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Debtor 1 **DEBORAH G. HAINER**

Case number (if known) 19-23474

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1565 GOLDBAUGH LANE	If Debtor 2 lives at a different address:
		Wexford, PA 15090 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Allegheny	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) 19-23474 Debtor 1 **DEBORAH G. HAINER**

ar	Tell the Court About	Your I	Bankruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Ban. e box.	kruptcy
	choosing to file under		Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				
3.	How you will pay the fee	•	about how yo	ou may pay. Typi attorney is subn	ically, if you are paying the fee yo	ck with the clerk's office in your local court for mo ourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or c	or money
						on, sign and attach the Application for Individual	ls to Pay
			I request tha	at my fee be wai		n only if you are filing for Chapter 7. By law, a ju our income is less than 150% of the official pove	
						n installments). If you choose this option, you mobial Form 103B) and file it with your petition.	ust fill out
).	Have you filed for bankruptcy within the	■ N	lo.				
	last 8 years?	ΠY	es.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ N	lo				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ N	lo. Go to I	ine 12.			
	i coluctios :	ПΥ	es. Has yo	our landlord obta	ined an eviction judgment agains	st you?	
				No. Go to line 1	12.		
				Yes. Fill out <i>Init</i> this bankruptcy		Judgment Against You (Form 101A) and file it a	s part of

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Debtor 1 DEBORAH G. HAINER Case number (if known) 19-23474

Par	Report About Any Bu	sinesses	You Owr	as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busine	ess			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code				
	it to this petition.		Chec	k the appropriate box t	o describe your business:			
				Health Care Busines	ss (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Es	state (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defi	ned in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following the following the following that it can deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor of the small business debtor in 11 U.S.C. 1116(1)(B).					small business debtor, you must attach your most recent balance sheet, statement of eral income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	No.	Iamı	not filing under Chapte	r 11.			
		□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrup Code.				
		☐ Yes.	I am f	iling under Chapter 11	and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	ous Property or Any F	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
	, · · ·			N	lumber, Street, City, State & Zip Code			

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Debtor 1 DEBORAH G. HAINER

Case number (if known) 19-23474

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit	:
counseling because of:	

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 DEBORAH G. HAINER Case number (if known) 19-23474

Part	6: Answer These Questi	ons for Re	porting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,	mer debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
				ss debts? Business debts are debts that nt or through the operation of the busines	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe th	at are not consumer debts or business de	ebts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.	
	Do you estimate that after any exempt property is excluded and	☐ Yes.	l am filing under Chapter 7. Do yo are paid that funds will be availabl	u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses
	administrative expenses		□ No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	1 -49		□ 1,000-5,000	2 5,001-50,000
	you estimate that you owe?	□ 50-99		□ 5001-10,000	50,001-100,000
		100-19		□ 10,001-25,000	☐ More than100,000
		200-99	9		
19.	How much do you	□ \$0 - \$5		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		1 - \$100,000	\$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			01 - \$500,000 01 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
			· • · · · · · · · · · · · · · · · · · ·		
20.	How much do you estimate your liabilities	\$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?		01 - \$100,000 01 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Part	:7: Sign Below		<u> </u>		
	<u> </u>	I have eva	umined this petition, and I declare u	under penalty of perjury that the information	on provided is true and correct
For	you	If I have ch	hosen to file under Chapter 7, I am	n aware that I may proceed, if eligible, und	der Chapter 7, 11,12, or 13 of title 11,
		United Sta	ites Code. I understand the relief a	available under each chapter, and I choos	se to proceed under Chapter 7.
				y or agree to pay someone who is not an ice required by 11 U.S.C. § 342(b).	attorney to help me fill out this
		I request r	elief in accordance with the chapte	er of title 11, United States Code, specifie	d in this petition.
		bankruptcy and 3571.	y case can result in fines up to \$25	ealing property, or obtaining money or pr 50,000, or imprisonment for up to 20 year	operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,
		DEBOR/	NAH G. HAINER AH G. HAINER of Debtor 1	Signature of Debtor 2	
		Executed	on September 19, 2019	Executed on	
			MM / DD / YYYY		D/YYYY

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Debtor 1 DEBORAH G. HAINER Case number (if known) 19-23474

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Russel	A. Burdelski, Esquire	Date	September 19, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Russell A.	Burdelski, Esquire		
	Offices of Russell A. Burdelski, E	Esquire	
	RY HIGHWAY 1, PA 15237		
Number, Street,	City, State & ZIP Code		
Contact phone	412-366-1511	Email address	atyrusb@choiceonemail.com
72688 PA			
Bar number & S	tate		

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			<u> </u>	
Fill in this info	ormation to identify your	case:		
Debtor 1	DEBORAH G. HA	INER		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number	19-23474			
(if known)				Check if this is amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		·
Par	t1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	142,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	50,225.76
	1c. Copy line 63, Total of all property on Schedule A/B	\$	192,225.76
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	172,832.79
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,947.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	0.00
	Your total liabilities	\$	175,779.79
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,627.76
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,063.80
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 DEBORAH G. HAINER

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,183.89 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,947.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,947.00

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Fill	in this inform	nation to identify	your case and th				C 10 01 45				
Deb	tor 1	DEBORAH G									
Deh	tor 2	First Name	Middle	Name		Last Na	ame				
	use, if filing)	First Name	Middle	Name		Last Na	ame				
Unit	ed States Bar	kruptcy Court for	the: WESTERN	DISTR	ICT OF PEN	NSYLVA	ANIA				
Cas	e number 1	9-23474								☐ Check if this is an	
										amended filing	
_		rm 106A/B e A/B: Pr	-							42/45	
										12/15 the category where you	
	er every quest	ion.	uilding, Land, or Otl			·				e number (if known).	
. Do	you own or h	ave any legal or eq	uitable interest in a	ny resid	lence, buildir	ıg, land, o	r similar property?	•			
	No. Go to Part	2.									
	Yes. Where is										
1.1	1565 GOLF	OBAUGH LANE	:	What	is the prope	-	all that apply				
		f available, or other desc		_	Single-famil Duplex or m	-	illding	the amount	Do not deduct secured claims or exer the amount of any secured claims on		
					Condominiu		_	Creditors VI	/ho Have Clair	ims Secured by Property.	
				_	Manufacture	ed or mobi	le home				
	Wexford	PA	15090-0000					Current va entire prop		Current value of the portion you own?	
	City	State	ZIP Code			property		\$14	2,000.00	\$142,000.00	
					Timeshare Other					our ownership interest ancy by the entireties, or	
				Who	has an intere	est in the p	property? Check one	_ `	e), if known.	ancy by the entireties, or	
	Alloghony				Debtor 1 on	•					
	County				Debtor 2 on Debtor 1 an	•	only				
							otors and another		if this is com tructions)	munity property	
						-	to add about this	item, such as lo	cal		
					erty identifica			EAMILY NO			
				<i>7</i> D					N-BBICK E	PESIDENCE	
				4 Bt	EDROOM	IBAIH	ROOM SINGLE	FAMILT NO	N-BRICK F	RESIDENCE.	
				4 BI	EDROOM	BAIR	ROOM SINGLE	E PAWILT NO	N-BRICK F	RESIDENCE.	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 19-23474-GLT Doc 13 Filed 09/19/19 Entered 09/19/19 13:43:24 Desc Main Document

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Case number (if known) 19-23474 **DEBORAH G. HAINER** Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes **FORD** Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **FOCUS** Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2015 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another **VEHICLE TO BE** \$6,700.00 \$6,700.00 **SURRENDERED** ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put CHEVROLET 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **CRUZE** Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2017 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$17,000.00 \$17,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$23,700.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$10.00 SOFA CHAIRS \$20.00 **DINING ROOM TABLE** \$50.00 TVS \$50.00 LAMPS \$20.00

\$10.00

CARPETS

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Document **DEBORAH G. HAINER**

	BOOKCASES	\$15.00
	BUFFET	\$25.00
	SILVERWARE	\$10.00
	STOVE	\$10.00
	MICROWAVE	\$10.00
	REFRIGERATOR	\$25.00
	WASHER	\$75.00
	WASIER	
	DRYER	\$75.00

	TELEPHONES	\$60.00
	MISC. APPLIANCES	\$100.00
	BEDROOM SUITES	\$100.00
	DESKS	\$25.00
	TVS	\$50.00

	LAMPS	\$20.00
	TOOLS	\$50.00
	ectronics xamples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu	usic collections; electronic devices
	including cell phones, cameras, media players, games No	
	Yes. Describe	
Ex	ellectibles of value **Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, other collections, memorabilia, collectibles No	coin, or baseball card collections;
	Yes. Describe	
	BOOKS	\$30.00

Official Form 106A/B

Debtor 1

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Debtor 1 DEBORAH	H G. HAINER		Case number (if known)	19-23474
musical in	otographic, exercise, and other	hobby equipment; bicycles, pool	ol tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No □ Yes. Describe				
10. Firearms Examples: Pistols, ri No Yes. Describe	ifles, shotguns, ammunition, and	d related equipment		
11. Clothes Examples: Everyday	v clothes, furs, leather coats, de	signer wear, shoes, accessories	3	
☐ No ■ Yes. Describe				
	CLOTHING			\$200.00
12. Jewelry <i>Examples:</i> Everyday ☐ No	r jewelry, costume jewelry, enga	agement rings, wedding rings, he	eirloom jewelry, watches, gems, g	gold, silver
Yes. Describe				
	JEWELRY			\$500.00
14. Any other personal ■ No □ Yes. Give specific		d not already list, including any	/ health aids you did not list	
		Part 3, including any entries fo		\$1,540.00
Part 4: Describe Your Fin	nancial Assets			
Do you own or have an	y legal or equitable interest in	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ou have in your wallet, in your h		on hand when you file your petition	on
— 163			Cash	\$20.00
			-	
institution		counts; certificates of deposit; sha ts with the same institution, list ea	ares in credit unions, brokerage hach.	nouses, and other similar
□ No ■ Yes		Institution name:		
_ 100				
	17.1. CHECKING	KEYBANK		\$4,100.76

Official Form 106A/B Schedule A/B: Property

page 4

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Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

18.		or publicly traded stocks, investment accounts with bi	rokerage firms, money market accounts	
	■ No			
	☐ Yes	Institution or issuer	r name:	
19.	joint venture	ock and interests in incorp	porated and unincorporated businesses, including an intere	est in an LLC, partnership, and
	■ No			
	Tes. Give specific in	formation about them Name of entity:	% of ownership:	
20.	Negotiable instruments	include personal checks, ca	otiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	☐ Yes. Give specific info	ormation about them Issuer name:		
	Retirement or pensior Examples: Interests in No		403(b), thrift savings accounts, or other pension or profit-sharing	g plans
	Yes. List each account	nt separately. Type of account:	Institution name:	
		PSEA	PUBLIC SCHOOLS EMPLOYEE RETIREMENT SYSTEM	\$865.00
	■ No Yes	s with landlords, prepaid rent	, public utilities (electric, gas, water), telecommunications compa Institution name or individual:	anies, or others
		or a periodic navment of mon	ney to you, either for life or for a number of years)	
_0.	■ No	or a portouto paymont of mon	is you, state for me of for a number of yours,	
		suer name and description.		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), ■ No		qualified ABLE program, or under a qualified state tuition p	rogram.
		stitution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(o	c):
25.	Trusts, equitable or fu	ture interests in property (other than anything listed in line 1), and rights or powers ex	xercisable for your benefit
	Yes. Give specific int	ormation about them		
26.			and other intellectual property eds from royalties and licensing agreements	
	☐ Yes. Give specific int	ormation about them		
27.		and other general intangib mits, exclusive licenses, coo	les perative association holdings, liquor licenses, professional licen	oses
	Yes. Give specific int	ormation about them		
М	oney or property owed	to you?		Current value of the portion you own?

Do not deduct secured claims or exemptions.

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Debtor 1 DEBORAH G. HAINER

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years......

	■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29	 Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property No Yes. Give specific information 	settlement
30	 Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensent benefits; unpaid loans you made to someone else ■ No □ Yes. Give specific information 	sation, Social Security
31	 Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insuran □ No ■ Yes. Name the insurance company of each policy and list its value. 	ce
	Company name: Beneficiary:	Surrender or refund value:
	AIL Whole life policy	\$20,000.00
34	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recessomeone has died. No Yes. Give specific information Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	
36	6. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$24,985.76
Pa	art 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	Do you own or have any legal or equitable interest in any business-related property? ■ No. Go to Part 6. □ Yes. Go to line 38.	
Pä	art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ■ No. Go to Part 7. □ Yes. Go to line 47.	

Official Form 106A/B Schedule A/B: Property page 6

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Case number (if known) 19-23474 **DEBORAH G. HAINER** Debtor 1

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$142,000.00 Part 2: Total vehicles, line 5 \$23,700.00 Part 3: Total personal and household items, line 15 57. \$1,540.00 58. Part 4: Total financial assets, line 36 \$24,985.76 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$50,225.76 Copy personal property total \$50,225.76 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$192,225.76

page 7 Official Form 106A/B Schedule A/B: Property

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			11 1 4400. 17 (7) 43	
Fill in this info	rmation to identify your	case:		
Debtor 1	DEBORAH G. HA	INER		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT O	DF PENNSYLVANIA	
Case number	19-23474			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.	
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)	

- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

SCHedule A/B that lists this property Portion you own Copy the value from Schedule A/B. 6.1 S10.00 S10.00 100% of fair market value, up to any applicable statutory limit CHAIRS Line from Schedule A/B: 6.2 S20.00 DINING ROOM TABLE Line from Schedule A/B: 6.3 S50.00 DINING ROOM TABLE Line from Schedule A/B: 6.3 S50.00 TVS Line from Schedule A/B: 6.4 S50.00 S50.00 TVS Line from Schedule A/B: 6.4 S50.00 S50.00 S50.00 TVS Line from Schedule A/B: 6.4 S50.00 S50.00 S50.00 TOW of fair market value, up to any applicable statutory limit TVS Line from Schedule A/B: 6.4 S50.00 S50.00 TOW of fair market value, up to any applicable statutory limit TVS Line from Schedule A/B: 6.4 S50.00 S50.00 TOW of fair market value, up to any applicable statutory limit TUS.C. § 522(d)(3)		•	• •	
SOFA \$10.00 \$10			Amount of the exemption you claim	Specific laws that allow exemption
Line from Schedule A/B: 6.1 CHAIRS Line from Schedule A/B: 6.2 S20.00 Interpretation of the foliation of			Check only one box for each exemption.	
CHAIRS Line from Schedule A/B: 6.2 \$20.00 \[\begin{array}{cccccccccccccccccccccccccccccccccccc	••••	\$10.00	\$10.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.2 DINING ROOM TABLE Line from Schedule A/B: 6.3 \$50.00 \$50.00 100% of fair market value, up to any applicable statutory limit TVS Line from Schedule A/B: 6.4 \$50.00 \$50.00 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(3) 12 U.S.C. § 522(d)(3) 13 U.S.C. § 522(d)(3) 14 U.S.C. § 522(d)(3) 15 U.S.C. § 522(d)(3) 16 U.S.C. § 522(d)(3) 17 U.S.C. § 522(d)(3) 18 U.S.C. § 522(d)(3) 19 U.S.C. § 522(d)(3) 10 U.S.C. § 522(d)(3)			10070 of fall market value, up to	
DINING ROOM TABLE Line from Schedule A/B: 6.3 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$50.00 \$11 U.S.C. § 522(d)(3) 100% of fair market value, up to any applicable statutory limit TVS Line from Schedule A/B: 6.4 \$50.00 \$50.00 \$50.00 \$50.00 \$100% of fair market value, up to any applicable statutory limit LAMPS Line from Schedule A/B: 6.5 \$20.00 \$100% of fair market value, up to any applicable statutory limit		\$20.00	\$20.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.3 TVS Line from Schedule A/B: 6.4 \$50.00 \$50.00 \$50.00 \$50.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit LAMPS Line from Schedule A/B: 6.5 \$20.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to	Line Holli Scriedule AVB. 4.2		10070 of fall market value, up to	
TVS Line from Schedule A/B: 6.4 \$50.00 \$50.00 \$50.00 \$50.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$20.00 \$20.00		\$50.00	\$50.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.4 100% of fair market value, up to any applicable statutory limit LAMPS	Ellie Holli Golfeddie 772. Gle		10070 of fair friance value, up to	
LAMPS Line from Schedule A/B: 6.5 100% of fair market value, up to any applicable statutory limit \$20.00 100% of fair market value, up to any applicable statutory limit \$20.00 100% of fair market value, up to		\$50.00	\$50.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.5	EINE HOLL GOLGGAGE AVD. 9.4		10070 of fair market value, up to	
□ 100% of fair market value, up to		\$20.00	\$20.00	11 U.S.C. § 522(d)(3)
any applicable statutory limit	Ellio Hotti Gorioddio 77D. Gio		100% of fair market value, up to any applicable statutory limit	

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19-23474

Debtor 1 DEBORAH G. HAINER

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Case number (if known)

tor 1 DEBORAH G. HAINER			Case number (if known)	19-23474
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
CARPETS		_	* 40.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.6	\$10.00		\$10.00	11 0.3.C. § 322(u)(3)
			100% of fair market value, up to any applicable statutory limit	
BOOKCASES Line from Schedule A/B: 6.7	\$15.00		\$15.00	11 U.S.C. § 522(d)(3)
2. C.			100% of fair market value, up to any applicable statutory limit	
BUFFET Line from Schedule A/B: 6.8	\$25.00		\$25.00	11 U.S.C. § 522(d)(3)
Line from Scriedule A/B: 0.0			100% of fair market value, up to any applicable statutory limit	
SILVERWARE Line from Schedule A/B: 6.9	\$10.00		\$10.00	11 U.S.C. § 522(d)(3)
EIRE HOIH GENERALIE AVD. 9.3			100% of fair market value, up to any applicable statutory limit	
STOVE Line from Schedule A/B: 6.10	\$10.00		\$10.00	11 U.S.C. § 522(d)(3)
Ellie IIolii ochedale A.B. G.10			100% of fair market value, up to any applicable statutory limit	
MICROWAVE Line from Schedule A/B: 6.11	\$10.00		\$10.00	11 U.S.C. § 522(d)(3)
2.00.00.00.00.00.00.00.00.00.00.00.00.00			100% of fair market value, up to any applicable statutory limit	
REFRIGERATOR Line from Schedule A/B: 6.12	\$25.00		\$25.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
WASHER Line from Schedule A/B: 6.13	\$75.00		\$75.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
DRYER Line from Schedule A/B: 6.14	\$75.00		\$75.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
TELEPHONES Line from Schedule A/B: 6.15	\$60.00		\$60.00	11 U.S.C. § 522(d)(3)
			100% of fair market value, up to any applicable statutory limit	
MISC. APPLIANCES Line from Schedule A/B: 6.16	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
LINE HOTH SCHEUWE AVD. V. 10			100% of fair market value, up to any applicable statutory limit	
BEDROOM SUITES	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6.17				

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Document Page 19 of 45 **DEBORAH G. HAINER** Case number (if known) 19-23474 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **DESKS** 11 U.S.C. § 522(d)(3) \$25.00 \$25.00 Line from Schedule A/B: 6.18 100% of fair market value, up to any applicable statutory limit **TVS** 11 U.S.C. § 522(d)(3) \$50.00 \$50.00 Line from Schedule A/B: 6.19 100% of fair market value, up to any applicable statutory limit **LAMPS** 11 U.S.C. § 522(d)(3) \$20.00 \$20.00 Line from Schedule A/B: 6.20 100% of fair market value, up to any applicable statutory limit **TOOLS** 11 U.S.C. § 522(d)(3) \$50.00 \$50.00 Line from Schedule A/B: 6.21 100% of fair market value, up to any applicable statutory limit **BOOKS** 11 U.S.C. § 522(d)(3) \$30.00 \$30.00 Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit **CLOTHING** 11 U.S.C. § 522(d)(3) \$200.00 \$200.00 Line from Schedule A/B: 11.1 П 100% of fair market value, up to any applicable statutory limit **JEWELRY** 11 U.S.C. § 522(d)(4) \$500.00 \$500.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$20.00 \$20.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **CHECKING: KEYBANK** 11 U.S.C. § 522(d)(5) \$4,100.76 \$4,100,76 Line from Schedule A/B: 17.1 П 100% of fair market value, up to any applicable statutory limit **PSEA: PUBLIC SCHOOLS** 11 U.S.C. § 522(d)(10)(E) \$865.00 \$865.00 **EMPLOYEE RETIREMENT SYSTEM** Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit AIL Whole life policy 11 U.S.C. § 522(d)(8) \$13,400.00 \$20,000.00 Line from Schedule A/B: 31.1 100% of fair market value, up to any applicable statutory limit

AIL Whole life policy

Line from Schedule A/B: 31.1

П

\$20,000.00

11 U.S.C. § 522(d)(5)

\$6,600,00

100% of fair market value, up to any applicable statutory limit

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Debtor 1 Debtor 1 DEBORAH G. HAINER

Debtor 1 DEBORAH G. HAINER

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

•	laiming a homestead exemption of more than \$170,350? adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)				
No					
Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?					
	No				
	Yes				

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		age 21	of 45			
Fill in this information to identify you	ur case:					
Debtor 1 DEBORAH G. H	IAINER					
First Name		ast Name				
Debtor 2	Middle Nesse	at Name				
(Spouse if, filing) First Name	Middle Name La	ast Name				
United States Bankruptcy Court for the	: WESTERN DISTRICT OF PENNS	YLVANIA				
Case number 19-23474						
Case number 19-23474 (if known)				☐ Check	if this is an	
					led filing	
					Ü	
Official Form 106D						
Schedule D: Creditors	Who Have Claims Se	cured	by Propert	V	12/15	
			<u> </u>			
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it number (if known).						
1. Do any creditors have claims secured b	y your property?					
☐ No. Check this box and submit t	his form to the court with your other sch	nedules. Yo	ou have nothing else t	o report on this form.		
Yes. Fill in all of the information	·		ŭ	,		
	below.					
Part 1: List All Secured Claims			Column A	Column B	Column C	
	more than one secured claim, list the creditors a particular claim, list the other creditors in l		Amount of claim	Value of collateral	Unsecured	
much as possible, list the claims in alphabet			Do not deduct the	that supports this	portion	
2.1 FIRST NATIONAL BANK	Describe the property that secures the	claim:	value of collateral. \$19,000.00	claim \$17,000.00	If any \$2,000.00	
Creditor's Name	2017 CHEVROLET CRUZE		Ψ10,000.00	Ψ11,000.00	Ψ2,000.00	
4140 EAST STATE	As of the date you file, the claim is: Chec	-111 414				
STREET	apply.	x all that				
Hermitage, PA 16148	Contingent					
Number, Street, City, State & Zip Code	Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
Debtor 1 only	☐ An agreement you made (such as mort	ando or coc	urod			
Debtor 2 only	car loan)	yaye or seco	uieu			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)				
At least one of the debtors and another	☐ Judgment lien from a lawsuit	,				
☐ Check if this claim relates to a	Other (including a right to offset)	AR LOAN				
community debt	— Other (including a right to onset)					
Date debt was incurred 08/2019	Last 4 digits of account number	xxxx				
<u> </u>						
2.2 GM FINANCIAL	Describe the property that secures the	claim:	\$10,856.14	\$6,700.00	\$4,156.14	
Creditor's Name	2015 FORD FOCUS		Ψ10,000.14	Ψο,ι σοισσ	<u> </u>	
	VEHICLE TO BE SURRENDE	RED				
	As of the date you file, the claim is: Chec	als all that				
PO BOX 183834	apply.	x all that				
Arlington, TX 76096-3834	Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.					
_	☐ An agreement you made (such as mort	raane or sec	ured			
■ Debtor 1 only □ Debtor 2 only	car loan)	gage or see	urcu			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechar	nic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a	5	AR LOAN				
community debt						
Date debt was incurred 06/2017	Last 4 digits of account number	1499				

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Debtor 1 DEBORAH G. HAINER			number (if known)	19-23474		
First Name Middle N	ame Last Name	_				
2.3 MTSA	Describe the property that secures t	the claim:	\$4,751.35	\$142,000.00	\$976.65	
Creditor's Name	1565 GOLDBAUGH LANE W. PA 15090 Allegheny County 4 BEDROOM 1 BATHROOM FAMILY NON-BRICK RESIDE As of the date you file, the claim is:	exford, / SINGLE ENCE.	ψ.,	V. 12,000.00	ψο. σ.σ.σ	
418 ARCADIA DRIVE Pittsburgh, PA 15237	apply.	Officer all that				
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated ☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as r car loan)	mortgage or secured	I			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,				
☐ Check if this claim relates to a community debt		Statutory Lien	(WATER & SEW	/AGE)		
Date debt was incurred	Last 4 digits of account numb	ber <u>8011</u>				
2.4 PLANET HOME LENDING	Describe the property that secures t		\$138,225.30	\$142,000.00	\$0.00	
Creditor's Name 321 RESEARCH	1565 GOLDBAUGH LANE W PA 15090 Allegheny County 4 BEDROOM 1 BATHROOM FAMILY NON-BRICK RESIDE As of the date you file, the claim is:	SINGLE ENCE.				
PARKWAY SUITE 303 Meriden, CT 06450	apply.					
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only	An agreement you made (such as r	mortgage or secured	I			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)				
At least one of the debtors and another	☐ Judgment lien from a lawsuit	,				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	MORTGAGE				
Date debt was incurred	Last 4 digits of account numb	ber <u>8026</u>				
2.5 US BANK NA	Describe the property that secures t	the claim:	\$0.00	\$0.00	\$0.00	
Creditor's Name	NOTICE ONLY					
4828 LOOP CENTRAL DRIVE	As of the date you file, the claim is: apply.	Check all that				
Houston, TX 77081	Contingent					
Number, Street, City, State & Zip Code	☐ Unliquidated					
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as r car loan)	mortgage or secured	I			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)				
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number	ber				

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Debt	or 1 DEBORAH G. HAINER	(Case number (if known)	19-23474	
	First Name Middle N	lame Last Name			
2.6	US BANK, NA	Describe the property that secures the claim:	\$0.00	\$0.00	\$0.00
	Creditor's Name	NOTICE ONLY			
	C/O KML Law Group Ste 5000, BNY				
	Independence Ctr 701 Market Street Philadelphia, PA 19106	As of the date you file, the claim is: Check all that apply. Contingent			
-	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
_	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as mortgage or sec car loan)	cured		
_	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At	t least one of the debtors and another	☐ Judgment lien from a lawsuit			
	heck if this claim relates to a community debt	Other (including a right to offset)			
Date	debt was incurred	Last 4 digits of account number			
Add	d the dollar value of your entries in C	Column A on this page. Write that number here:	\$172,832	2.79	
	nis is the last page of your form, add	the dollar value totals from all pages.	\$172,832	2.79	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Document Page	<u> 24 of 4</u>	.5		
Fill in this information to identify your case:				
Debtor 1 DEBORAH G. HAINER				
First Name Middle Name Last Nam	16			
Debtor 2				
(Spouse if, filing) First Name Middle Name Last Nam	ne			
United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVA	NIA			
Coco number 40 22474				
Case number (if known) 19-23474			☐ Check	if this is an
,			_	led filing
Official Form 400F/F				
<u>Official Form 106E/F</u> Schedule E/F: Creditors Who Have Unsecured Claim				12/15
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims a		r creditors with NON	IPRIORITY claims I i	
any executory contracts or unexpired leases that could result in a claim. Also list execute Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not incl Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, coeft. Attach the Continuation Page to this page. If you have no information to report in a Phame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims	ude any cred opy the Part	ditors with partially s you need, fill it out,	secured claims that a number the entries in	are listed in n the boxes on the
Do any creditors have priority unsecured claims against you?				
□ No. Go to Part 2.				
■ Yes.				
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecuidentify what type of claim it is. If a claim has both priority and nonpriority amounts, list that possible, list the claims in alphabetical order according to the creditor's name. If you have reart 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.	claim here ar	nd show both priority a	and nonpriority amoun	ts. As much as
(For an explanation of each type of claim, see the instructions for this form in the instruction	n booklet.)	Total claim	Priority	Nonpriority
2.1 IRS Last 4 digits of account number	xxxx	\$2,947.00	amount \$2,947.00	amount \$0.00
Priority Creditor's Name			<u> </u>	
1000 LIBERTY AVENUE When was the debt incurred? STE 727	05/2018		-	
Pittsburgh, PA 15222				
Number Street City State Zip Code As of the date you file, the claim	is: Check al	I that apply		
Who incurred the debt? Check one.				
☐ Debtor 1 only ☐ Unliquidated				
☐ Debtor 2 only ☐ Disputed				
☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured cl	aim:			
■ At least one of the debtors and another □ Domestic support obligations				
☐ Check if this claim is for a community debt ☐ Taxes and certain other debts	vou owe the	novernment		
Is the claim subject to offset?				
■ No □ Other. Specify	,,			
☐ Yes FEDERAL	INCOME	TAX		
Dort 2: Liet All of Your MONDRIODITY Unconvend Claims				
Part 2: List All of Your NONPRIORITY Unsecured Claims				
3. Do any creditors have nonpriority unsecured claims against you?				
No. You have nothing to report in this part. Submit this form to the court with your other	schedules.			
☐ Yes.				
Part 3: List Others to Be Notified About a Debt That You Already Listed				

notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 DEBORAH G. HAINER

19-23474

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,947.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2,947.00
				Т	otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	60	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	Ψ	
	Oi.	here.	Oi.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

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			<u> </u>	
Fill in this info	rmation to identify your	case:		
Debtor 1	DEBORAH G. HA	INER		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	WESTERN DISTRICT C	PF PENNSYLVANIA	
Case number	19-23474			
(if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3			<u> </u>		
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	<u> </u>		Sidio	5000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	

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Fill in this info	ormation to identify your	Document Document	Page 27 of	45	Ī	
Debtor 1	DEBORAH G. HA					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA			
Case number	19-23474					
(if known)					☐ Check if this	
					amended filir	ng
Official ⊏	orm 106H					
Schedul	e H: Your Cod	ebtors				12/15
☐ No ■ Yes 2. Within t	the last 8 years, have you	vou are filing a joint case, do not be a lived in a community proponer Nevada, New Mexico, Puerto	erty state or territory	? (Community proper		clude
■ No. Go	to line 3.					
☐ Yes. Did	d your spouse, former spou	ise, or legal equivalent live wi	th you at the time?			
in line 2 a	gain as a codebtor only i D), Schedule E/F (Official	ors. Do not include your sp f that person is a guarantor Form 106E/F), or Schedule	or cosigner. Make su	ure you have listed t	the creditor on Schedule	e D (Official
	umn 1: Your codebtor , Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	reditor to whom you owe les that apply:	e the debt
156: Wex	AIG HAINER 5 GOLDBAUGH LANE kford, PA 15090 band			■ Schedule D, □ Schedule E/F □ Schedule G	f, line	

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Fill in this	information to identify your	2000			
Fill in this	s information to identify your o	ase:			
Debtor 1	DEBORAH	G. HAINER		_	
Debtor 2 (Spouse, if fi	iling)				
United St	ates Bankruptcy Court for the	e: WESTERN DISTRIC	T OF PENNSYLVANIA	_	
Case nun	mber 19-23474			Ch	eck if this is:
(If known)			_		An amended filing
					A supplement showing postpetition chapter
					13 income as of the following date:
Offici	<u>al Form 106I</u>				MM / DD/ YYYY
Sche	dule I: Your Inc	ome			12/
supplying spouse. If	g correct information. If you f you are separated and you	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your spouse ith you, do not include infor	is living wit	ebtor 2), both are equally responsible for th you, include information about your out your spouse. If more space is needed number (if known). Answer every question
4 500					
	in your employment rmation.		Debtor 1		Debtor 2 or non-filing spouse
	u have more than one job,	Employment status	■ Employed		☐ Employed
	ch a separate page with rmation about additional	Employment status	□ Not employed		■ Not employed

Part 2: Give Details About Monthly Income

Occupation

Employer's name

Employer's address

How long employed there?

employers.

Include part-time, seasonal, or

Occupation may include student or homemaker, if it applies.

self-employed work.

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

CUSTODIAN

SERVICES LLC

ARAMARK FACILITY

1101 MARKET STREET Philadelphia, PA 19103

2.5 YEARS

RETIRED

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,397.59 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. \$ 0.00 3,397.59

Official Form 106I Schedule I: Your Income page 1

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Debt	or 1	DEBORAH G. HAINER		Case	e number (if known)	19-23474		
				For	r Debtor 1	For Debtor	2 or	
				го	i Debtoi i	non-filing		
	Сор	y line 4 here	4.	\$	3,397.59	\$	0.00	
	·			_		·		-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	578.20	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	-
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	-
	5e.	Insurance	5e.	\$	0.00	\$	0.00	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	
	5h.	Other deductions. Specify: PA STATE INCOME TAX	5h.+			+ \$	0.00	-
		PINE	_	\$_	30.46	\$	0.00	-
		PINE TWP	_	\$_	4.00	\$	0.00	-
		PA UNEMPLOY DENTAL	_	\$_ \$	2.03 53.64	\$ \$	0.00	-
		MEDICAL	_	\$ \$	289.64	\$	0.00	-
		VISION	_	\$-	9.14	\$	0.00	-
_				-		· 		-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ __	1,060.60	\$	0.00	-
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,336.99	\$	0.00	_
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent		_		-		-
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$-	0.00	\$	0.00	-
	8e.	Social Security	8e.	\$	1,077.00	·	,952.00	_
	8f.	Other government assistance that you regularly receive		· –	1,011100	· <u> </u>	1002100	-
		Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$-	835.17	\$	426.60	-
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	· <u> </u>	0.00	-
		· · · · · · · · · · · · · · · · · · ·	_					- ¬
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,912.17	\$	2,378.60)
								╛
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		4,249.16 + \$	2,378.60	= \$	6,627.76
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				_,0:0:00	* -	0,020
11		e all other regular contributions to the expenses that you list in Schedule	, –				·	
		ude contributions from an unmarried partner, members of your household, your		dents	s, your roommates	s, and		
		r friends or relatives.						
	_	not include any amounts already included in lines 2-10 or amounts that are not a	availab	le to	pay expenses list			0.00
	Spe	ыу.						0.00
12	hhΑ	the amount in the last column of line 10 to the amount in line 11. The res	ult is th	ne coi	mbined monthly in	ncome		
		e that amount on the Summary of Schedules and Statistical Summary of Certai				, if it	_	0 007 70
	appl	ies				12.	\$	6,627.76
							Combin	ned
	_		_					y income
13.	_ `	you expect an increase or decrease within the year after you file this form	?					
	=	No.						
		Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	our case:					
	tor 1	DEBORAH G		₹		Ch∈	eck if this is: An amended filing	1
	otor 2 ouse, if filing)						A supplement sho	wing postpetition chapter f the following date:
Unit	ed States Bankr	ruptcy Court for the	: WESTE	RN DISTRICT OF PENN	SYLVANIA		MM / DD / YYYY	
	e number 19 nown)	9-23474						
Of	fficial Fo	rm 106J				-		
So	chedule	J: Your	Expen	ses				12/1
info	ormation. If m		eded, atta	If two married people a ch another sheet to this n.				
Par	t 1: Descr	ibe Your House	hold					
1.	■ No. Go to		in a sonar	ata housahold?				
	□N	0		al Form 106J-2, <i>Expenses</i>	s for Separate House	e <i>hold</i> of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
	•							□ No
								_ □ Yes □ No
								Yes
								□ No □ Yes
3.	expenses of	oenses include f people other tl d your depende	han $_{oldsymbol{\square}}$	No Yes				
exp	imate your ex		our bankrı	iptcy filing date unless y				napter 13 case to report of the form and fill in the
the		h assistance an		government assistance luded it on Schedule I:			Your exp	penses
4.		or home owners		ses for your residence.	Include first mortgag	e 4.	\$	0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	•	rty, homeowner's				4b.	·	0.00
		maintenance, re owner's associat		pkeep expenses Iominium dues		4c. 4d.	·	200.00
5.	Additional r	nortgage payme	ents for yo	ur residence, such as ho	me equity loans	5.	\$	0.00

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Deb	tor 1 DEBO	RAH G. HAINER	Case num	nber (if known)	19-23474
6.	Utilities:				
	6a. Electrici	ity, heat, natural gas	6a.	\$	394.00
	6b. Water, s	sewer, garbage collection	6b.	\$	84.15
	6c. Telepho	one, cell phone, Internet, satellite, and cable services	6c.	\$	297.00
	6d. Other. S	Specify: GARBAGE & CABLE TV	6d.	\$	290.00
		usekeeping supplies	7.	\$	870.00
	Childcare and	d children's education costs	8.	\$	0.00
	Clothing, laur	ndry, and dry cleaning	9.	· -	140.00
	•	e products and services	10.	·	170.00
		dental expenses	11.	· .	250.00
		on. Include gas, maintenance, bus or train fare.		·	
		e car payments.	12.	\$	400.00
١.		nt, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
	Charitable co	ontributions and religious donations	14.	\$	200.00
5.	Insurance.	•		· -	
	Do not include	e insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insu	urance	15a.	\$	36.82
	15b. Health in	nsurance	15b.	\$	250.00
	15c. Vehicle	insurance	15c.	\$	303.00
	15d. Other in	nsurance. Specify: AFLACK	15d.	\$	158.83
S.		t include taxes deducted from your pay or included in lines 4 or 2	20.		
•	Specify:	t morado taxos doddotod nom your pay or moradod in imos 1 or 2	16.	\$	0.00
		r lease payments:			
		ments for Vehicle 1	17a.	· <u> </u>	0.00
		ments for Vehicle 2	17b.		0.00
	17c. Other. S	Specify:	17c.	\$	0.00
	17d. Other. S	Specify:	17d.	\$	0.00
3.		its of alimony, maintenance, and support that you did not re		<u> </u>	0.00
		m your pay on line 5, Schedule I, Your Income (Official Form	1 06I). 18.		
€.		nts you make to support others who do not live with you.		\$	0.00
	Specify:		19.		
).		operty expenses not included in lines 4 or 5 of this form or o			2.22
		ges on other property	20a.		0.00
	20b. Real est		20b.	· ·	0.00
		y, homeowner's, or renter's insurance	20c.		0.00
	20d. Mainten	nance, repair, and upkeep expenses	20d.	· ·	0.00
	20e. Homeov	wner's association or condominium dues	20e.	\$	0.00
	Other: Specify	y:	21.	+\$	0.00
	Calculate vou	ur monthly expenses			
	•	s 4 through 21.		\$	4,063.80
		e 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06.1-2	\$	4,000.00
			000 2	·	4 000 00
	22c. Add line 2	22a and 22b. The result is your monthly expenses.		\$	4,063.80
3.	•	ur monthly net income.			
		ne 12 (your combined monthly income) from Schedule I.	23a.	*	6,627.76
	23b. Copy yo	our monthly expenses from line 22c above.	23b.	-\$	4,063.80
	23c Subtract	et your monthly expenses from your monthly income.			
		ult is your <i>monthly net income</i> .	23c.	\$	2,563.96
1.	For example, do	ct an increase or decrease in your expenses within the year or you expect to finish paying for your car loan within the year or do you exhe terms of your mortgage?			ease or decrease because of a
	■ No.				

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Fill in this in	formation to identify your	case:			
Debtor 1	DEBORAH G. HA	NER			
DODIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	19-23474				
(if known)					Check if this is an amended filing
If two married You must file obtaining mo		, both are equally respo le bankruptcy schedule li connection with a bank	nsible for supplying corre	ect information. Making a false statem	ent, concealing property, or or imprisonment for up to 20
:	Sign Below				
Did you	pay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Ye	s. Name of person				ptcy Petition Preparer's Notice, and Signature (Official Form 119)
	enalty of perjury, I declare v are true and correct.	that I have read the sum	mary and schedules filed	with this declaration	and
χ /s/ Γ	DEBORAH G. HAINER		Х		
	BORAH G. HAINER		Signature of D	Debtor 2	
	ature of Debtor 1		-		
Date	September 19, 2019		Date		

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Fill in	this infor	mation to identify you	r case:			
Debto	or 1	DEBORAH G. H	AINFR			
		First Name	Middle Name	Last Name		
Debto	or 2 e if, filing)	First Name	Middle Name	Last Name		
(Spous	e II, IIIIIIg)	riist Name	ivildale Name	Last Name		
Unite	d States Ba	ankruptcy Court for the:	WESTERN DISTRICT OF	FPENNSYLVANIA		
Case	number	19-23474				
(if know	/n)				-	Check if this is an mended filing
Oπ:	sial Ea					
		orm 107 t of Financial	Affairs for Individ	duals Filing for B	ankruntev	4/19
					equally responsible for sup additional pages, write you	
		n). Answer every que			,	
Part '	Give	Details About Your Ma	arital Status and Where You	Lived Before		
1. V	Vhat is you	ır current marital statı	ıs?			
	.					
-	MarriedNot ma					
2. D	uring the	last 3 years, have you	lived anywhere other than	where you live now?		
	.					
-	■ No] Yes. Li	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
1	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
states	and territo	<i>rie</i> s include Arizona, Ca	llifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	co, Texas, Washington and W	/isconsin.)
	No					
	Yes. M	ake sure you fill out Scl	hedule H: Your Codebtors (Of	fficial Form 106H).		
Port 1	Evol	oin the Sources of Vou	ır İngama			
Part 2	2 Ехріа	in the Sources of You	ir income			
F	ill in the tot	al amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part-		ndar years?
Г] No					
1		III in the details.				
	_ 100.11	iii iii dotallo.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		l of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$19,617.63	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 **DEBORAH G. HAINER**

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that app	
	last calend nuary 1 to	dar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$35,459.00	☐ Wages, commi bonuses, tips	issions,
				☐ Operating a business		Operating a bu	usiness
		dar year be December		■ Wages, commissions, bonuses, tips	\$16,733.05	☐ Wages, commi	issions,
				☐ Operating a business		☐ Operating a bu	usiness
5.	Include include and other particular winnings. I	come regard public benef f you are fili	lless of wheth fit payments; ng a joint cas	ner that income is taxable. Ex pensions; rental income; inte se and you have income that		ted from lawsuits; ro nly once under Debt	
		Fill in the de	etails.				
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposcribe below.	Gross income (before deduction and exclusions)
		1 of curre	nt year until kruptcy:	Retirement Income	\$6,680.00		
				Social Security Benefits	\$1,077.00		
	last calend	dar year: December	31, 2018)	Retirement Income	\$10,020.00		
Par	t 3: List	Certain Pa	vments You	Made Before You Filed for	Bankruntev		
					• •		
6.	Are either No.	Neither De	ebtor 1 nor D	's debts primarily consume bebtor 2 has primarily cons personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U	.S.C. § 101(8) as "incurred by
		During the No.	90 days befo	, , , , , , , , , , , , , , , , , , , ,	lid you pay any creditor a tota	of \$6,825* or more?	?
		□ Yes	paid that cre		nts for domestic support oblig		ents and the total amount you d support and alimony. Also, d
		* Subject			rs after that for cases filed on	or after the date of a	adjustment.
	■ Yes.			r both have primarily const ore you filed for bankruptcy, d	umer debts. lid you pay any creditor a tota	of \$600 or more?	
		■ No.	Go to line 7				
		□ Yes	include pay		id a total of \$600 or more and bbligations, such as child supp		ou paid that creditor. Do not so, do not include payments to
	Creditor's	s Name and	d Address	Dates of payme	ent Total amount	Amount you still owe	Was this payment for

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Debtor 1 **DEBORAH G. HAINER**

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No							
	☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cost No		ments or transfer a	any property on a	ccount of a do	ebt that benefited an		
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name		
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures						
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in an						
	Case title Case number	Nature of the case	Court or agency		Status of th	e case		
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?		
	Creditor Name and Address	Describe the Property	Describe the Property			Value of the		
		Explain what happened	d			property		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		luding a bank or fil	nancial institution	, set off any a	mounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date :	action was	Amount		
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a		
Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	0 per person1	?		
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							

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14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or or			ns with a total	value of more than	\$600 to any charity?	
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value	
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did y	you lose anytl	ning because of thef	t, fire, other disaster,	
	No						
	Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Describ	oe any insurance coverage for the l	oss	Date of your loss	Value of property lost	
	now the loss occurred		the amount that insurance has paid. Let ce claims on line 33 of Schedule A/B:		1033	1031	
Par	t 7: List Certain Payments or Transfer	·e					
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details.	preparin	g a bankruptcy petition?			rty to anyone you	
	Person Who Was Paid		Description and value of any prop	erty	Date payment	Amount of	
	Address Email or website address Person Who Made the Payment, if Not You		transferred		or transfer was made	payment	
	Law Offices of Russell A. Burdelsk 1020 Perry Highway Pittsburgh, PA 15237 atyrusb@choiceonemail.com	ci	\$1,000 RETAINER + \$310 FILIN PAID. BALANCE OF \$3,000 TO THROUGH PLAN		08/2019	\$1,000.00	
17.	Within 1 year before you filed for bankrupromised to help you deal with your cred Do not include any payment or transfer that No Yes. Fill in the details.	ditors or	to make payments to your creditor		r transfer any prope	rty to anyone who	
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment	
18.							
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and value of property transferred		iny property or received or debts change	Date transfer was made	
	Person's relationship to you						

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Debtor 1 **DEBORAH G. HAINER**

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)							
	■ No □ Yes Fill in the details							
		5				5		
	Name of trust	Description and v	alue of the pro	perty tran	sterred	Date Transfer was made		
Par				_				
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc No Yes. Fill in the details.	r other financial accour	nts; certificate	s of depos				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	.		Date account was closed, sold, moved, or	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, a	ny safe de	transferred	itory for securities,		
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?		
Par	9: Identify Property You Hold or Control	for Someone Else						
23.	Do you hold or control any property that sor for someone.	neone else owns? Inclu	ude any prope	rty you bor	rrowed from, are storing	or, or hold in trust		
	No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Par	110: Give Details About Environmental Info	rmation						
For	he purpose of Part 10, the following definition	ons apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
-	Site means any location, facility, or property to own, operate, or utilize it, including dispo	sal sites.						
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		as a hazardou	s waste, ha	azardous substance, toxi	c substance,		

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 **DEBORAH G. HAINER**

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	un	der or in violation of an environme	ntal law?			
		No Yes. Fill in the details.							
	Na	me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	ve you notified any governmental unit of a	,						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or adm	inistrative proceeding under any envi	ron	mental law? Include settlements a	nd orders.			
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11	Give Details About Your Business or C	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrupto	cy, did you own a business or have an	y of	f the following connections to any	business?			
		☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	eith	ner full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting	or equity securities of a corporation						
		No. None of the above applies. Go to P	art 12.						
		Yes. Check all that apply above and fill	in the details below for each business	S.					
		siness Name	Describe the nature of the business		Employer Identification number				
	Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed								
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
		No Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)								

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Debtor 1 **DEBORAH G. HAINER**

Part 1	2: Sign Below		
are tru with a	e and correct. I understand that making a	nancial Affairs and any attachments, and I declar false statement, concealing property, or obtaining \$250,000, or imprisonment for up to 20 years, or	ng money or property by fraud in connection
/s/ DE	BORAH G. HAINER		
DEBO	DRAH G. HAINER	Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	September 19, 2019	Date	
Did yo	u attach additional pages to <i>Your Statem</i>	ent of Financial Affairs for Individuals Filing for E	Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy form	s?
■ No			
☐ Yes	. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration, and Sig	gnature (Official Form 119).

Fill in this information to identify your case:						
Debtor 1	DEBORAH G. HAINER					
Debtor 2 (Spouse, if filing)						
United States B	Bankruptcy Court for the: Western District of Pennsylvania					
Case number (if known)	19-23474					

	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
		1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
		2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
		3. The commitment period is 3 years.					
		4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debt		Column Debtor non-file	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissi	ons (before all	\$	2,922.12	\$	0.00
 Alimony and maintenance payments. Do not includ Column B is filled in. 	le payme	ents from	a spouse if	\$	0.00	\$	0.00
 All amounts from any source which are regularly pof you or your dependents, including child support from an unmarried partner, members of your househor and roommates. Do not include payments from a sporyou listed on line 3. Net income from operating a business, 	rt. Includ old, your	le regula depende not includ	contributions nts, parents,	\$	0.00	\$	0.00
profession, or farm	\$	0.00					
Gross receipts (before all deductions) Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or fa	arm \$		Copy here ->	\$	0.00	\$	0.00
6. Net income from rental and other real property	Debtor	1		-			
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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19-23474

DEBORAH G. HAINER Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ 0.00 0.00 9. Pension or retirement income. Do not include any amount received that was a 835.17 426 60 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 3,757.29 426.60 4,183.89 each column. Then add the total for Column A to the total for Column B. Total average Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 4,183.89 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 4,183.89 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 4.183.89 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 50,206.68 15b. The result is your current monthly income for the year for this part of the form.

Debtor 1

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Debtor 1 DEBORAH G. HAINER Case number (if known) 19-23474

16	. Calcula	te the median family income that applies to y	ou. Follow these steps:			
	16a. Fill	in the state in which you live.	PA			
	16b. Fill	in the number of people in your household.	2			
	То	in the median family income for your state and find a list of applicable median income amounts structions for this form. This list may also be available.	, go online using the link specifi		\$	66,649.00
17	. How do	the lines compare?				
	17a.	■ Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b.	☐ Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcuyour current monthly income from line 14 a	lation of Your Disposable Inc			
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Сору у	our total average monthly income from line 1	1.		\$	4,183.89
19.	contend spouse's	the marital adjustment if it applies. If you are I that calculating the commitment period under 1 s income, copy the amount from line 13.	1 U.S.C. § 1325(b)(4) allows yo	u to deduct part of your		
	19a. If the	he marital adjustment does not apply, fill in 0 on	line 19a.	•	\$	0.00
	19b. Su	btract line 19a from line 18.			\$	4,183.89
20.	Calcula	te your current monthly income for the year.	Follow these steps:			
		py line 19b			\$	4,183.89
	Mu	ultiply by 12 (the number of months in a year).			Y	12
						12
	20b. Th	e result is your current monthly income for the y	ear for this part of the form		\$	50,206.68
	20c. Co	py the median family income for your state and	size of household from line 16c		\$	66,649.00
	21. Ho	ow do the lines compare?				
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered by the court, on the t	op of page 1 of this form, check	box 3, <i>Th</i>	e commitment
		Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	less otherwise ordered by the co	ourt, on the top of page 1 of this	form, che	ck box 4, The
Par	t 4:	ign Below				
	By signi	ing here, under penalty of perjury I declare that t	he information on this statemen	t and in any attachments is true	and corre	ct.
)	/ /s/ DE	BORAH G. HAINER				
	DEBC	DRAH G. HAINER				
	Ū	ure of Debtor 1				
		September 19, 2019 IM / DD / YYYY				
		necked 17a, do NOT fill out or file Form 122C-2.				
	If you ch	necked 17b, fill out Form 122C-2 and file it with t	his form. On line 39 of that form	, copy your current monthly inco	me from I	ine 14 above.

Debtor 1 DEBORAH G. HAINER

Case number (if known)

19-23474

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2019 to 07/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: WAGES: ARAMARK

Income by Month:

6 Months Ago:	02/2019	\$2,179.76
5 Months Ago:	03/2019	\$2,322.80
4 Months Ago:	04/2019	\$2,386.91
3 Months Ago:	05/2019	\$4,096.89
2 Months Ago:	06/2019	\$3,148.75
Last Month:	07/2019	\$3,397.59
	Average per month:	\$2,922.12

Line 9 - Pension and retirement income

Source of Income: **PENSION**

Income by Month:

6 Months Ago:	02/2019	\$835.17
5 Months Ago:	03/2019	\$835.17
4 Months Ago:	04/2019	\$835.17
3 Months Ago:	05/2019	\$835.17
2 Months Ago:	06/2019	\$835.17
Last Month:	07/2019	\$835.17
	Average per month:	\$835.17

Non-CMI - Social Security Act Income

Source of Income: **SOCIAL SECURITY**

Income by Month:

6 Months Ago:	02/2019	\$1,077.00
5 Months Ago:	03/2019	\$1,077.00
4 Months Ago:	04/2019	\$1,077.00
3 Months Ago:	05/2019	\$1,077.00
2 Months Ago:	06/2019	\$1,077.00
Last Month:	07/2019	\$1,077.00
	Average per month:	\$1,077.00

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Debtor 1 DEBORAH G. HAINER Case number (if known) 19-23474

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 02/01/2019 to 07/31/2019.

Line 9 - Pension and retirement income

Source of Income: RETIREMENT

Income by Month:

6 Months Ago:	02/2019	\$426.60
5 Months Ago:	03/2019	\$426.60
4 Months Ago:	04/2019	\$426.60
3 Months Ago:	05/2019	\$426.60
2 Months Ago:	06/2019	\$426.60
Last Month:	07/2019	\$426.60
	Average per month:	\$426.60

Non-CMI - Social Security Act Income

Source of Income: SOCIAL SECURITY

Income by Month:

6 Months Ago:	02/2019	\$1,952.00
5 Months Ago:	03/2019	\$1,952.00
4 Months Ago:	04/2019	\$1,952.00
3 Months Ago:	05/2019	\$1,952.00
2 Months Ago:	06/2019	\$1,952.00
Last Month:	07/2019	\$1,952.00
	Average per month:	\$1,952.00

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In re	DEBORAH G. HAINER		Case N	o. 19-23474	
		Debtor(s)	Chapte	r <u>13</u>	
	DISCLOSURE OF COMPEN	SATION OF ATTOI	RNEY FOR	DEBTOR(S)	
	compensation paid to me within one year before the filing	nkr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that fore the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to templation of or in connection with the bankruptcy case is as follows:			
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	1,000.00	
	Balance Due			3,000.00	
2.	\$310.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comper	nsation with any other person	unless they are m	embers and associates of my lav	w firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				ı. A
6.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspect	s of the bankrupto	y case, including:	
	a. Analysis of the debtor's financial situation, and renderib. Preparation and filing of any petition, schedules, statenc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which	may be required;		
7.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discresponses to Trustee's certificates of defaconferences, status conferences, contest other actions not specifically set forth in a rate of \$250/hr and such fees will be subfee provision.	hargeability actions, judi ault, or any other advers ed hearing, actions deali paragraph 6(d) will be pa	cial lien avoida ary proceeding ng with claims id through the	, amended plans, conciliat filed after the bar date and Chapter 13 Plan and charg	ion any ed at
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any abankruptcy proceeding.	agreement or arrangement for	payment to me for	or representation of the debtor(s) in
S	September 19, 2019	/s/ Russell A. Bui	delski. Esquire		
	Date	Russell A. Burde	lski, Esquire		
		Signature of Attorne The Law Offices		urdolski Esquiro	
		1020 PERRY HIG		urueiski, Esydire	
		Pittsburgh, PA 15	5237		
		412-366-1511 Fa		11	
		atyrusb@choiced	onemail.com		
		ivame oj iaw jirm			